

6-07-01

10/005958

December 3, 2001
Date of Deposit

UTILITY PATENT APPLICATION TRANSMITTAL AND FEE SHEET

Applicant (or identifier): TSUCHIHASHI ET AL.

Title: HUMAN SINGLE NUCLEOTIDE POLYMORPHISMS

Enclosed are:

- | | | |
|-----|-------------------------------------|--|
| 1. | <input checked="" type="checkbox"/> | Specification (Including Claims and Abstract) - 455 pages |
| 2. | <input checked="" type="checkbox"/> | Drawings - 131 sheets (108 sheets of Figures, 23 sheets of Tables) |
| 3. | <input type="checkbox"/> | Executed Declaration and Power of Attorney (original or copy) |
| 4. | <input type="checkbox"/> | Microfiche Computer Program (appendix) |
| 5. | | Nucleotide and/or Amino Acid Sequence Submission |
| | <input checked="" type="checkbox"/> | Computer Readable Copy |
| | <input checked="" type="checkbox"/> | Paper Copy |
| | <input checked="" type="checkbox"/> | Statement Verifying Identity of Above Copies |
| 6. | <input type="checkbox"/> | Preliminary Amendment |
| 7. | <input type="checkbox"/> | Assignment Papers (Cover Sheet & Document(s)) |
| 8. | <input type="checkbox"/> | English Translation of |
| 9. | <input type="checkbox"/> | Information Disclosure Statement |
| 10. | <input type="checkbox"/> | Certified Copy of Priority Document(s) |
| 11. | <input checked="" type="checkbox"/> | Return Receipt Postcard |
| 12. | <input checked="" type="checkbox"/> | Other: Unexecuted Declaration and Power of Attorney |

Filing fee calculation:

- ☐ Before calculating the filing fee, please enter the enclosed Preliminary Amendment.
☐ Before calculating the filing fee, please cancel claims .

Basic Filing Fee								\$ 740
Multiple Dependent Claim Fee (\$ 280)								\$
Foreign Language Surcharge (\$ 130)								\$
	For	Number Filed		Number Extra		Rate		
Extra Claims	Total Claims	50	-20	30	x	\$ 18	=	\$ 540
	Independent Claims	8	-3	5	x	\$ 84	=	\$ 420
TOTAL FILING FEE								\$ 1,700

- ☒ Please charge Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company in the amount of \$1,784. An additional copy of this paper is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR §1.16 and §1.17 which may be required in connection with this application, or credit any overpayment, to Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company.

Please address all correspondence to the address associated with Customer No. 23914, which is currently:

Stephen B. Davis
Bristol-Myers Squibb Company
Patent Department
P.O. Box 4000
Princeton, NJ 08543-4000

Please direct all telephone calls to the undersigned at the number given below, and all telefaxes to (609) 252-4526.

Respectfully submitted,



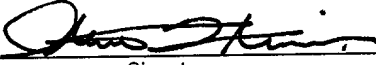
Stephen C. D'Amico
Agent for Applicants
Reg. No. 46,652
Tel. No. (609) 252-5289

Date: December 3, 2001

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Assistant Commissioner for Patents, Washington, D.C. 20231.

Stephen C. D'Amico
Type or print name


Signature

December 3, 2001
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

TSUCHIHASHI ET AL.

APPLICATION NO:

FILED: November 30, 2001

FOR: HUMAN SINGLE NUCLEOTIDE POLYMORPHISMS

Assistant Commissioner for Patents
Washington, D.C. 20231

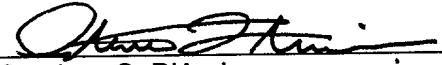
SUBMISSION OF SEQUENCE LISTING
INCLUDING STATEMENT OF VERIFICATION

Sir:

Applicants hereby provide a Computer Readable Form of the Sequence Listing as well as the Paper Copy thereof. The undersigned states that the Paper Copy and the Computer Readable Form, submitted in accordance with 37 CFR §1.821(c) and (e), respectively, are the same.

Respectfully submitted,

Bristol-Myers Squibb Company
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P.O. Box 4000
Princeton, NJ 08543-4000
(609) 252-5289
Date: December 3, 2001


Stephen C. D'Amico
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